## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mall Mail Stop ISSUE FEE Commissioner for Patents Alexandria, Virginia 22313-1450

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or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be untiled to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

APPLICATION NO. FILINGDATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/419,266 10/15/1999 Roland R. Thompson FLD0001-CIP 9982  TITLE OF INVENTION: SYSTEM AND METHOD FOR PERFORMING SUBSTITUTE FULFILLMENT  APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE UTILITY YES \$650 \$0 \$0 \$650 12/3/2003  EXAMINER ART UNIT CLASS-SUBCLASS  Colon, Catherine M. 3623 705-099.000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  O Change of correspondence address or indication of of "Fee Address" (37 CFR 1.363).  O Change of correspondence address or indication of orm PTO/SB/122 ettached.  O "Fee Address" indication of or "Fee Address" Indication form PTO/SB/122 ettached.  O "Fee Address" indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address" indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address" indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address indication of or "Fee Address" indication form STO/SB/122 ettached.  O "Fee Address indication of or Fee Address indication for a senior of up to 2 registered attorney or agents of up to 2 registered patent attorneys or agents of up to 2 registered patent attorneys or agents of up to 2 registered patent attorneys or agents of up to 2 registered patent attorneys or agents of up to 3 registered attorney or agents of up to 2 registered patent attorneys or agent of up to 2 registered attorney o	27510 7	STOCKTON LLP reet, N.W.	SEP 2 3 2003		of mailing can only be used for This certificate cannot be used from an appearance of mailing or transmission.  Certificate of Mailing or Transt this Fee(s) Transmittal is being a with sufficient postage for fir fail Stop ISSUE FEE address SPTO, on the date indicated belong the sufficient of the sufficient postage for fir fail Stop ISSUE FEE address SPTO, on the date indicated belong the sufficient of the	missian
O9/419,266 10/15/1999 Roland R. Thompson FLD0001-CIP 9982  TITLE OF INVENTION: SYSTEM AND METHOD FOR PERFORMING SUBSTITUTE FULFILLMENT  APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE UTILITY YES \$650 \$0 12/3/2003  EXAMINER ART UNIT CLASS-SUBCLASS  COlon, Catherine M. 3623 705-009.000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.65).  OChange of correspondence address (or Change of Correspondence Address for United Including on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single from (having as a member a signeted attorney or agents OR, alternatively, (2) the name of up to 2 registered patent attorneys or agents OR, alternatively, (2) the name of up to 2 registered patent attorneys or agents OR, alternatively, (2) the name of up to 2 registered patent attorneys or agents or upon PTO/SBI/12) attached.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent, Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a pubstitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Malvern, Pennsylvania USA  Please check the appropriate assignee category or categories (will not be printed on the patent): O individual Oxcorporation or other private group entity O government of Fee(s):  20 A check in the amount of the fee(s) is enclosed.  OP Publication Fee  GYAdvance Order - # of Copies 10  The Director is hereby authorized by charge the required fee(s), or credit any overpayment. to	APPLICATION NO.	FILING DATE	FIRST NAME	D INVENTOR	A'TTORNEY DOCKET NO	
APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE  LITLETY YES \$650 \$0 \$0 \$0 \$650 \$1273/2003  EXAMINER ART UNIT CLASS-SUBCLASS  COlon, Catherine M. 3623 705-009.000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.56).  O'Change of correspondence address (or Change of Correspondence Address from PTO/SB1/22) attached.  O'Fee Address' indication (or "Fee Address" Indication form PTO/SB1/22) attached.  O'Fee Address' indication (or "Fee Address" Indication form PTO/SB1/22) attached.  O'Fee Address' indication (or "Fee Address" Indication form Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment has been previously submitted to the USPTO or is being submitted on the patent.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Malvern, Pennsylvania USA  D'A check in the amount of the fee(s) is enclosed.  O Payment by credi	09/419 266					
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents of the names of up to 2 registered patent attorneys or agents of agents, indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-4/2 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTTE: Unless an assignce is identified below, no assignee data will appear on the patent, inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Malvern, Pennsylvania USA  Please check the appropriate assignce category or categories (will not be printed on the patent);  A check in the amount of the fee(s) is enclosed.  Q Publication Fee  (D Publication Fee  (D Payment by credit card, Form PTO-2038 is attached.  (D Payment by credit card, Form PTO-2038 is attached.  (D The Director is hereby authorized by aphorized fee(s), or credit any overpayment, to	Colon Catherine M			<del></del>		
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.	Director for Patents is reque	sted to apply the Issue Fee a			•	

1 homes A. Corredo 9-23-2003

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commussioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)

PTO/SB/21 (08-09) 2 3 2003 Phase type a plus sign (+) inside this box --> [+] Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 09/419,266 Applicati n Number & TRADEM **TRANSMITTAL** October 15, 1999 **Filing Date FORM** First Nam d Inventor Thompson et al. 2761 (to be used for all correspondence after initial filing) Group Art Unit Colon, C. M. **Examiner Name** Total Number of Pages in This Submission FLD0001-CIP Attorney Docket Number ENCLOSURES (check all that apply) After Allowance Communication to Assignment Papers Fee Transmittal Form (for an Application) Appeal Communication to Board of Drawing(s) Fee Attached Appeals and Interferences Appeal Communication to Group Licensing-related Papers Amendment / Response (Appeal Notice, Brief, Reply Brief) Petition Proprietary Information After Final Petition to Convert to a Status Letter Affidavits/declaration(s) **Provisional Application** Power of Attorney, Revocation Other Enclosure(s) Extension of Time Request Change of Correspondence Address (please identify below): Submission of Issue Fee Payment + Part B - Fee(s) Express Abandonment Request **Transmittal** Request for Refund Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Remarks Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Thomas A. Corrado, Reg. # 42,439 Individual name Signature September 23, 2003 Date **CERTIFICATE OF MAILING** I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: Typed or printed name Date Signature

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS:

THOMPSON et al.

**SERIAL NO.:** 

09/419,266

**GROUP ART UNIT: 3623** 

FILED:

15 October 1999

EXAMINER: COLON, C. M.

TITLE:

SYSTEM AND METHOD FOR PERFORMING SUBSTITUTE

**FULFILLMENT** 

## SUBMISSION OF ISSUE FEE PAYMENT

U.S. Patent and Trademark Office 2011 South Clark Place Customer Window, Mail Stop Issue Fee Crystal Plaza Two, Lobby, Room 1B03 Arlington, VA 22202

Sir:

Responsive to the Notice of Allowance and Issue Fee Due mailed September 3, 2003, the undersigned is submitting herewith the Issue Fee in the amount of \$650 in the above-identified application, plus an additional \$30.00 for ten extra copies of the patent.

A copy of Part B of the issue fee transmittal is submitted herewith.

The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No. 50-1458.

Entry of this submission and prompt notification thereof is respectfully requested.

Respectfully submitted,

Dated:

KILPATRICK STOCKTON LLP 607 14th Street, N.W., Suite 900

Washington, D.C. 20005

(202) 508-5800

By:

Thomas A. Corrado Registration No. 42,439

4. Conali